## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

869. 018USI

| CLAIMS AS FILED - PART I<br>(Column 1)                   |  |   |                   |                     |                                 | mn 2)             |      | SMALL ENTITY TYPE   |                        | OR  | OTHER THAN<br>SMALL ENTITY              |                        |
|--|--|---|-------------------|---------------------|---------------------------------|-------------------|------|---------------------|------------------------|-----|---|------------------------|
| TOTAL CLAIMS   |  |   | 83                |                     |                                 |                   |      | RATE                | FEE                    |     | RATE                                    | FEE                    |
| FOR N  |  |   | NUMBER F          | NUMBER FILED        |                                 | NUMBER EXTRA      |      | BASIC FEE           | 355.00                 | OR  | BASIC FEE                               | · 710.00               |
| TOTAL CHARGEABLE CLAIMS 83 minu                          |  |   |                   | ıs 20=              | • .6                            | 3                 |      | X\$ 9=              |                        | OR  | X\$18=                                  | 1134                   |
| INDEPENDENT CLAIMS / / minus 3 =                         |  |   |                   |                     |                                 | 11                |      | X40=                |                        | OR  | X80=                                    | 880                    |
| MULTIPLE DEPENDENT CLAIM PRESENT                         |  |   |                   |                     |                                 |                   |      | +135=               |                        | OR  | +270=                                   |                        |
| * If the difference in column 1 is less than zero, enter |  |   |                   |                     | r "0" in c                      | olumn 2           |      | TOTAL               |                        | OR  | TOTAL                                   | 2724                   |
| CLAIMS AS AMENDED - PAR                                  |  |   |                   |                     | IT II                           | •                 |      | •                   |                        |     | OTHER                                   | THAN                   |
|  |  |   |                   |                     | lumn 2) (Column 3)              |                   |      | SMALL               |                        | OR  | SMALL                                   |                        |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                   | NUM                 | BER<br>OUSLY<br>FOR             | PRESENT<br>EXTRA  |      | RATE                | ADDI-<br>TIONAL<br>FEE |     | RATE                                    | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus             | **                  |                                 | = .               |      | X\$ 9=              |                        | OR  | X\$18=                                  |                        |
|  | Independent  | *   | Minus             | ***                 | T. C.I. A 13.4                  | =                 | 4    | X40=                |                        | OR  | X80=                                    |                        |
| L  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                   |                     |                                 |                   |      | +135=               | in the first           | OR  | +270=                                   |                        |
|  |  |   |                   |                     |                                 |                   |      | TOTAL<br>ADDIT. FEE |                        | OB. | TOTAL<br>ADDIT. FEE                     |                        |
|  |  | )   | ADDIT. FEE        |                     | . <b></b>                       |                   | 1 19 |                     |                        |     |   |                        |
| AMENDMENT B  |  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |                   | HIGI<br>NUN<br>PREV | IMN 2) HEST MBER IOUSLY: D FOR  | PRESENT<br>EXTRA  |      | RATE                | ADDI-<br>TIONAL<br>FEE |     | RATE                                    | ADDI-<br>TIONAL<br>FEE |
|  | Total  | •   | Minus             | **                  |                                 | =                 |      | X\$ 9=              |                        | OR  | -X\$18=                                 |                        |
|  | Independent  | *   | Minus             | ***                 |                                 | =                 |      | X40=                |                        | OR  | X80=                                    |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT   |   |                   |                     | CLAIM                           |                   | J    | +135=               |                        | OR  | +270=                                   |                        |
|  |  |   |                   |                     |                                 |                   |      | TOTAL<br>ADDIT. FEE |                        | OR  | TOTAL<br>ADDIT. FEE                     |                        |
|  |  | (Column 1)                                  |                   | (Colu               | ımn 2)                          | (Column 3         |      | ADDIT: 1 EE         |                        | •   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                        |
| AMENDMENT C  | ingerial jes a state of  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   | such a such       | NUI<br>PREV         | HEST<br>MBER<br>IOUSLY<br>D FOR | PRESENT'<br>EXTRA |      | RATE                | ADDI-<br>TIONAL<br>FEE |     | RATE                                    | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus             | **                  |                                 | =                 |      | X\$ 9=              |                        | OR  | X\$18=                                  |                        |
|  | independent  | •   | Minus             | ***                 |                                 | ]=                | ]    | X40=                |                        | OR  | X80=                                    |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDEN  |   |                   |                     |                                 |                   | ل    | +135=               |                        | OR  | +270=                                   |                        |
|  | If the entry in colu   | mn 1 is less than                           | the entry in colu | mn 2, wri           | ite "0" in co                   | olumn 3.          | •    | TOTAL               |                        | •   | TOTAL                                   |                        |
| **   | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                   |                     |                                 |                   |      |                     |                        |     |   |                        |